

MINOR POLITICAL PARTY DESIGNATION PETITION

WARNING:

IT IS AGAINST THE LAW:

For anyone to sign this petition with any name other than one’s own or to knowingly sign one’s name more than once for the same candidate or to knowingly sign the petition when not a registered elector.
Do not sign this petition unless you are an eligible elector. To be an eligible elector you must be registered to vote and eligible to vote in _____ elections.

(Name of political subdivision/jurisdiction)

Do not sign this petition unless you have read or have had read to you the proposed nomination petition in its entirety and understand its meaning.

PETITION TO NOMINATE _____ TO THE OFFICE OF _____
(Name of person sought to be elected) (Title of Office/District #)

REPRESENTING THE _____ PARTY

INSTRUCTIONS FOR PETITION SIGNERS AND CIRCULATORS

1. TO SIGN A PETITION
- A. Read the warning at the top of the page.

B. To sign a petition you must be a registered voter in the _____.
(Name of political subdivision)

C. No person may sign for another.

D. The petition circulator may not assist a signer.

E. If a signer is disabled and needs assistance, a third party should provide that assistance. The third party providing assistance shall sign his or her name and address on a separate line and state that (s)he rendered assistance to the disabled elector.
2. HOW TO SIGN THE PETITION
- A. Print clearly.

B. The petition signature line consists of two lines, both of which must be fully completed.

C. Use black or blue ink. Do not use ditto marks to provide information on a signature line.

D. A signer must use the residence address where he or she resides.

E. Do not use a post office box. Street name and number must be provided.

F. For county abbreviations, use the first four letters of the county name.

G. The signer must complete all portions of a signature line.

H. A signer must not place a zip code or birth date under “Signing Date”.

I. Corrections: If a small correction is made, the signer should initial the change. If a larger correction is required, the signer should **completely** cross out the incorrect information and proceed to use the next two blank lines.
3. TO CIRCULATE A PETITION
- A. Read the warning at the top of each page.

B. There can only be one circulator for each petition section.

C. A petition section may not be left on a table unattended or passed among potential signers if the circulator is not accompanying the petition section. The circulator must witness every signature line as it is written.

D. Do not take the petition section apart. If the original staples are removed the petition section will not count.

E. Do not sign your own petition section.

F. Make sure that all the required information is complete before a signer leaves your presence.
4. WHAT TO DO WHEN THE CIRCULATOR HAS FINISHED COLLECTING SIGNATURES
- A. Every valid signature counts. Signatures on partially completed petition sections may count.

B. A petition section must be properly notarized. Take the petition to a notary public, who will then notarize the affidavit. Do not sign or date your affidavit before you appear before the notary.

C. No additional signatures may be collected after the affidavit has been notarized. The notarized petition section should then be immediately returned in person to:

Print the candidate’s name and mailing address (and the phone number if applicable) or the name and mailing address of someone designated to represent the candidate.

SAMPLE FORMAT

THE PETITION FORMAT SHOULD BE SUBMITTED TO THE OFFICE OF THE COLORADO SECRETARY OF STATE FOR APPROVAL BEFORE IT IS CIRCULATED. THE BLANK LINES SHOULD BE FILLED IN (NOT CIRCULATOR AFFIDAVIT) AND A HARD-COPY PROTO TYPE OF THE PETITION AS IT WILL BE CIRCULATED SHOULD BE FILED FOR APPROVAL. IT IS NOT REQUIRED THAT THIS PAGE (ONE) BE ATTACHED TO THE SIGNATURE LINE PAGES. INSTRUCTION LINES 2, F AND 4, C MAY BE MODIFIED TO INDICATE THE COUNTIES LOCATED WITHIN THE CANDIDATE’S DISTRICT AND TO INDICATE THE METHOD TO TURN IN THE PETITION. PLEASE REMOVE THE FORMATTING INSTRUCTION BOXES BEFORE SUBMISSION.

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(Name of political subdivision/jurisdiction)

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PETITION TO NOMINATE _____ TO THE OFFICE OF _____
(Name of person sought to be elected) (Title of Office/District #)

We, the undersigned registered electors of the State of Colorado representing the _____ Party, hereby nominate _____, who resides at _____
(Printed Name of Candidate) (Street Name & Number City/Town/Zip County)

for the office of _____ to be voted for at the Primary Election to be held on _____
(Title of Office/District #) (Month/Day/Year)

I am an eligible elector of the district mentioned in this petition as shown on the registration books of the county clerk.
I have not signed any other petition for any other candidate for the same office.

| | | | |
|----|--------------|-------------------------------------|-----------------|
| 1 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 2 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 3 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 4 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 5 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 6 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 7 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 8 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 9 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 10 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 11 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 12 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |

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PETITION TO NOMINATE _____ TO THE OFFICE OF _____
(Name of person sought to be elected) (Title of Office/District #)

We, the undersigned registered electors of the State of Colorado representing the _____ Party, hereby nominate

_____, who resides at _____
(Printed Name of Candidate) (Street Name & Number City/Town/Zip County)

for the office of _____ to be voted for at the Primary Election to be held on _____
(Title of Office/District #) (Month/Day/Year)

I am an eligible elector of the district mentioned in this petition as shown on the registration books of the county clerk.
I have not signed any other petition for any other candidate for the same office.

| | | | |
|----|--------------|-------------------------------------|-----------------|
| 13 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 14 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 15 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 16 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 17 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 18 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 19 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 20 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 21 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 22 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 23 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 24 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |

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(Name of person sought to be elected) (Title of Office/District #)

We, the undersigned registered electors of the State of Colorado representing the _____ Party, hereby nominate

_____, who resides at _____
(Printed Name of Candidate) (Street Name & Number City/Town/Zip County)

for the office of _____ to be voted for at the Primary Election to be held on _____
(Title of Office/District #) (Month/Day/Year)

I have been affiliated with the political party mentioned in this petition for at least 29 days as shown on the registration books of the county clerk and recorder. I have not signed any other petition for any other candidate for the same office.

| | | | |
|----|--------------|-------------------------------------|-----------------|
| 25 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 26 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 27 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 28 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 29 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |
| 30 | Signature | Residence Address (Street & Number) | County |
| | Printed Name | City/Town | Date of Signing |

AFFIDAVIT OF CIRCULATOR

I, _____, (*Printed Name of Circulator) being duly sworn, depose and say that I was an eligible elector and eligible to vote in the political subdivision in which the petition was circulated and signed by the listed electors; that I have been affiliated with the political party mentioned in the petition at the time the petition was circulated as shown on the registration books of the county clerk and recorder; that I circulated the section of the petition; that each signature on the petition section is the signature of the person whose name it purports to be; that to the best of my knowledge and belief each of the persons signing the petition section was, at the time of signing, an eligible elector affiliated with the political party mentioned in the petition; and that I have not paid or will not in the future pay and that I believe that no other person has paid or will pay, directly or indirectly, any money or other thing of value to any signer for the purpose of inducing or causing the signer to sign the petition.

(*Signature of Circulator) (*Residence Address [Street & Number] City/Town/Zip) (*County)

*(SEAL) *STATE OF COLORADO, COUNTY OF _____

*Subscribed and sworn to before me this _____ day of _____, 20____

(*Notary Signature)

*Required field for petition section acceptance *My Commission Expires: _____